

Letter to the Editor

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The Challenges of Transferring Corpse of the Dead of Road Traffic Crash Scenes in Iran

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According to the latest World Health Organization (WHO) report, the road traffic injury (RTI) death rate in Iran was around 16000 cases in 2018,¹ meaning that 1 person died about every 19 minutes from RTIs.² In order to respond to RTIs in Iran, the police, emergency medical services (EMS), fire department, and Iranian Red Crescent Society (IRCS) play important roles in controlling and managing road traffic crash scenes, and helping the injured.^{3,4} The police provide scene security, the EMS treat and transfer the injured to the hospital, the IRCS conducts search and rescue operations, and the fire department extinguishes fires, as required. RTIs may involve death at the crash scene, and the transfer of the remains of casualties have constituted a persistent problem. This has been a source of distress for survivors and relatives, and the cause of myriad legal problems. The insufficiency of legal frameworks for transferring corpses from road traffic crash scenes has also caused conflict between Iranian relief agencies.

By law, municipalities are responsible for transporting remains from urban traffic crashes to forensic pathology departments. These municipal activities are however restricted in scope to a 18.65-mile radius around city limits. The remains of RTI victims outside urban areas (as defined by municipal scope) are a regular source of conflict, as no Iranian relief agencies consider this issue their legal responsibility.

The lack of clear accountability among relief organizations for the transfer of remains of crash victims has often led to the abandonment of corpses for extended periods at road traffic crash scenes. For example, in an RTI outside Ahwaz city, the remains of a 50-year-old man had been abandoned on the Mahshahr Highway for several hours, and no organization was willing to transfer them to the Ahwaz forensic pathology department.⁵ The news was widely reported, and cabinet ministers of Iran determined that the EMS was responsible for transporting the remains of RTI victims outside urban areas. This determination received the strong opposition of EMS leaders around the country. It was considered problematic because the decision was made without conducting expert studies, and without consulting the Ministry of Health and medical education authorities.

The facilities of the EMS are limited, especially in peri-urban and rural areas, and both ambulances and ambulance personnel cannot practically be considered for the transportation of human remains. Given that each ambulance is designed for 1 injured person, carrying victim remains interferes with the priority of transferring injured individuals. The extended time periods required to wash and sterilize ambulances carrying remains of crash victims also hamper the availability of therapeutic teams for the relief system. The EMS designation was therefore not implemented, failed to resolve the problem, and caused more conflict between relief agencies at road traffic crash scenes.

Unfortunately, the law still does not explicitly state which organization is responsible for transferring the remains of road traffic crash victims from crash scenes outside urban areas, while people continue to die of RTIs in the country annually. Unclear protocols for determining who should collect and transfer the remains of crash victims have led to these corpses remaining on the ground at road traffic crash scenes. People present at road traffic crash scenes however expect that these remains be removed immediately, constituting another challenge for the respective relief agencies.

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